

# Exhibit K

## CONFIDENTIAL – SUBJECT TO PROTECTIVE ORDER



## Termination/Separation Checklist

Complete section I on the day that you receive notice and send electronically to HR (see below).  
 \* 2 week written resignation must be submitted to HR for PTO/Holiday payout according to policy.  
 Print a copy to complete section II and III with the employee on their last day and route to HR with the employees badge and written notice.  
 \* To send section I: File, Send To: Mail Recipient (as attachment) enter status.changes@ridgewaymedical.org as e-mail address. Type the employees name in the subject line.

## Section I: Completed by Supervisor/Manager once notice is received.

Name:

Department Number:

Last Day of Work:

Termination Date:

Was a two week written notice given? :

- ☐ Yes - send written notice to HR immediately to meet requirement for PTO/Holiday payout by ☐ fax or by ☐ scanned e-mail attachment  
☐ No (PTO/Holiday balances will not be paid out)  
☐ Involuntary

Reason for Termination:

Voluntary

Involuntary ☐ Eligible for Rehire ☐ check employee file

- ☐ Relocation (please indicate your new address in the notes section)  
☐ New Position  
☐ Retirement  
☐ Continuing Education  
☐ Dissatisfaction with position/employer  
☐ Personal Reasons

- ☐ Misconduct  
☐ Extended LOA  
☐ Reduction in Force  
☐ Not working on-call hours  
☐ Poor Attendance/Job Performance  
☐ Unable to perform the essential functions

Employee's Supervisor/Manager:

Received in HR:

## Section II: Complete with the employee on the last day worked.

Badge Received: ☐ Yes ☐ No  
 (Include with signed checklist and forward to HR)

Return of Company Property:  
☐ Keys ☐ Cell Phone ☐ Pager

All expenses submitted through Accounts Payable? ☐ Yes ☐ No

☐ Laptop ☐ P-Card ☐ Other:

☐ Computer Access Request form has been completed (per policy #3223) and sent to MIS

Notes:

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## Section III: Signatures

Employee:

Date:

Supervisor/Dept. Mgr.:

Date:

HR Representative:

Date:

HR use only:

\_\_\_\_\_ Tuition Reimb owed to RMC \_\_\_\_\_ Term in system \_\_\_\_\_ Clear benefits/ins. \_\_\_\_\_ Received Final Paycheck \_\_\_\_\_ Premium catch-up

CC: Employee file

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